

## ISSUE CLIP STAMP AREA (for additional cross references)

POSITION	INITIAL	ID NO.	DATE
FEE DETERMINATION	✓		04/10/01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	-JP	1227	05/10/01
RESPONSE FORMALITY REVIEW			

BEST AVAILABLE COPY

## INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral)... Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Final	Original	Date
1	✓	✓	01/01/01
2	✓	✓	02/01/01
3	✓	✓	03/01/01
4	✓	✓	04/01/01
5	✓	✓	05/01/01
6	✓	✓	06/01/01
7	✓	✓	07/01/01
8	✓	✓	08/01/01
9	✓	✓	09/01/01
10	✓	✓	10/01/01
11	✓	✓	11/01/01
12	✓	✓	12/01/01
13	✓	✓	13/01/01
14	✓	✓	14/01/01
15	✓	✓	15/01/01
16	✓	✓	16/01/01
17	✓	✓	17/01/01
18	✓	✓	18/01/01
19	✓	✓	19/01/01
20	✓	✓	20/01/01
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22	✓	✓	22/01/01
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31	✓	✓	31/01/01
32	✓	✓	32/01/01
33	✓	✓	33/01/01
34	✓	✓	34/01/01
35	✓	✓	35/01/01
36	✓	✓	36/01/01
37	✓	✓	37/01/01
38	✓	✓	38/01/01
39	✓	✓	39/01/01
40	✓	✓	40/01/01
41	✓	✓	41/01/01
42	✓	✓	42/01/01
43	✓	✓	43/01/01
44	✓	✓	44/01/01
45	✓	✓	45/01/01
46	✓	✓	46/01/01
47	✓	✓	47/01/01
48	✓	✓	48/01/01
49	✓	✓	49/01/01
50	✓	✓	50/01/01

Claim	Final	Original	Date
51	✓	✓	01/01/01
52	✓	✓	02/01/01
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here